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CONFIRMATION NO. 9893

SERIAL NUMBER 10/642,427	FILING OR 371(c) DATE 08/15/2003 RULE	CLASS 033	GROUP ART UNIT 2859	ATTORNEY DOCKET NO. FAO-0149
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/366,589 02/13/2003  
 which claims benefit of 60/394,908 07/10/2002  
 and claims benefit of 60/357,599 02/14/2002

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 11/12/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 50	TOTAL CLAIMS 39	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

## ADDRESS

23413

## TITLE

METHOD FOR PROVIDING SENSORY FEEDBACK TO THE OPERATOR OF A PORTABLE MEASUREMENT MACHINE

FILING FEE RECEIVED 921	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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